PAGE 1 / 12

Image# 201601319005286808

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

FORM 3X F	or Other Than An Auth	orized Committee	Office	e Use Only
1. NAME OF COMMITTEE (in full)	TYPE OR PRINT ▼	Example: If typing, type over the lines.	12FE4M5	
COMMITTEE TO STRE	ENGTHEN AMERICA	x; THE	<u> </u>	
	1 1 1 1 1 1 1 1 1			
ADDRESS (number and street)	215 4th Avenue			
Check if different than previously reported. (ACC)	Haddon Heights		NJ 08	3035
2. FEC IDENTIFICATION NU	MBER ▼ CITY	Y A	STATE ▲	ZIP CODE ▲
C C00492165	3. IS	THIS EPORT X (N) OF	AMENDE (A)	ED
4. TYPE OF REPORT (Choose One) (a) Quarterly Reports: April 15 Quarterly Report (Q1 July 15 Quarterly Report (Q2 October 15 Quarterly Report (Q3 X January 31 Year-End Report (YE July 31 Mid-Year Report (Non-election Year Only) (MY) Termination Report (TER)	Report Due On: Mar 2 (c) 12-Day PRE-Election Report for the: (d) 30-Day	General (30G)	Sep 20 (M	(Non-Election Year Only) Dec 20 (M12) (Non-Election Year Only)
5. Covering Period 07	01 / 2015	through 12	31	2015
I certify that I have examined this Type or Print Name of Treasurer	Report and to the best of i Mrs. Robyn A. D. Ferdinand	my knowledge and belief it is	true, correct and com	plete.
Signature of Treasurer Mrs. R	obyn A. D. Ferdinand	[Electronically Filed]	Date 01 /	29 / 2016
NOTE: Submission of false, erroned	ous, or incomplete information	may subject the person signing		nalties of 2 U.S.C. §437g. EC FORM 3X
Use Only			"	Rev. 12/2004

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003) Page 2

Write or Type Committee Name

COMMITTEE TO STRENGTHEN AMERICA; THE

Report Covering the Period: From: 07 01 2015 To: 12 31 2015

		COLUMN A This Period	COLUMN B Calendar Year-to-Date
6.	(a) Cash on Hand January 1, 2015		83791.21
	(b) Cash on Hand at Beginning of Reporting Period	67221.51	
	(c) Total Receipts (from Line 19)	0.00	0.00
	(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	67221.51	83791.21
7.	Total Disbursements (from Line 31)	17459.01	34028.71
8.	Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	49762.50	49762.50
9.	Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10.	Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	

×

This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission 999 E Street, NW Washington, DC 20463

Toll Free 800-424-9530 Local 202-694-1100

DETAILED SUMMARY PAGE

of Receipts

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name

COMMITTEE TO STRENGTHEN AMERICA; THE

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
Contributions (other than loans) From:		
(a) Individuals/Persons Other		
Than Political Committees		0.00
(i) Itemized (use Schedule A)	0.00	0.00
(1) 11 11 11 11	200	0.00
(ii) Unitemized	0.00	0.00
(iii) TOTAL (add	0.00	0.00
Lines 11(a)(i) and (ii)▶	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees	7	
(such as PACs)	0.00	0.00
(d) Total Contributions (add Lines		
11(a)(iii), (b), and (c)) (Carry		
Totals to Line 33, page 5)	0.00	0.00
Transfers From Affiliated/Other		
Party Committees	0.00	0.00
F		
All Loans Received	0.00	0.00
Loan Repayments Received	0.00	0.00
Offsets To Operating Expenditures	7	7
(Refunds, Rebates, etc.)		
(Carry Totals to Line 37, page 5)	0.00	0.00
Refunds of Contributions Made		
to Federal Candidates and Other		
Political Committees	0.00	0.00
Other Federal Receipts		
(Dividends, Interest, etc.)	0.00	0.00
Transfers from Non-Federal and Levin Funds		,
(a) Non-Federal Account	0.00	
(from Schedule H3)	0.00	0.00
	0.00	
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))	0.00	0.00
(from Schedule H3	Schedule H5)	3)
al Receipts (add Lines 11(d),		
12, 13, 14, 15, 16, 17, and 18(c))	0.00	0.00
, , , , , , , , , , , , , , , , , , , ,	, , , , , , , , , , , , , , , , , , , ,	
Total Federal Receipts		

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements		Total This Period		
1.	Operating Expenditures: (a) Allocated Federal/Non-Federal	Total Tillo I Ollow	Calendar Year-to-Date	
	Activity (from Schedule H4) (i) Federal Share	0.00	0.00	
	(i) I ederal Share			
	(ii) Non-Federal Share	0.00	0.00	
	(b) Other Federal Operating			
	Expenditures	459.01	728.71	
	(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))▶	459.01	728.71	
	Transfers to Affiliated/Other Party	400.01	120.11	
•	Committees	0.00	0.00	
	Contributions to Federal Candidates/Committees			
	and Other Political Committees	8000.00	8000.00	
	Independent Expenditures	0.00	0.00	
	(use Schedule E)	0.00	0.00	
	(2 U.S.C. §441a(d)) (use Schedule F)	0.00	0.00	
	(use scriedule F)	7 7	0.00	
	Loan Repayments Made	0.00	0.00	
	Loans Made	0.00	0.00	
	Refunds of Contributions To: (a) Individuals/Persons Other			
	Than Political Committees	0.00	0.00	
	(h) Political Party Committees	0.00	0.00	
	(b) Political Party Committees(c) Other Political Committees	0.00		
	(such as PACs)	0.00	0.00	
	(d) Total Contribution Refunds	0.00	0.00	
	(add Lines 28(a), (b), and (c))▶	7	0.00	
	Other Disbursements	9000.00	25300.00	
		, , , ,		
	Federal Election Activity (2 U.S.C. §431(20))			
	(a) Allocated Federal Election Activity			
	(from Schedule H6)	0.00	0.00	
	(i) Federal Share	0.00	0.00	
	(ii) "Levin" Share	0.00	0.00	
	(b) Federal Election Activity Paid Entirely		7 7	
	With Federal Funds	0.00	0.00	
	(c) Total Federal Election Activity (add			
	Lines 30(a)(i), 30(a)(ii) and 30(b))▶	0.00	0.00	
	Total Dishursements (add Lines 21/s), 22			
	Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))	17459.01	24029 74	
	20, 21, 20, 20, 21, 20(d), 20 and 00(0))	11408.01	34028.71	
	Total Federal Disbursements			
	(subtract Line 21(a)(ii) and Line 30(a)(ii)			
	from Line 31)	17459.01	34028.71	

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
3. Total Contributions (other than loans) (from Line 11(d), page 3)	0.00	0.00
4. Total Contribution Refunds (from Line 28(d))	0.00	0.00
5. Net Contributions (other than loans) (subtract Line 34 from Line 33)	0.00	0.00
6. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	459.01	728.71
7. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
8. Net Operating Expenditures (subtract Line 37 from Line 36)	459.01	728.71

SCHEDULE B (FEC Form 3X)	Llea canarata cahadula(a)	FOR LINE	PAGE 6 OF 12		
ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the Detailed Summary Page	(check only 21b 27	one) 22 23 2 28a 28b	24 25 26 28c 29 30b	
Any information copied from such Reports and State or for commercial purposes, other than using the na					
NAME OF COMMITTEE (In Full) COMMITTEE TO STRENGTHEN	AMERICA; THE				
Full Name (Last, First, Middle Initial) A. TD Bank			Date of Disbursem		
Mailing Address P.O.Box 5094			07 03	2015	
City Mount LAurel Purpose of Disbursement	State Zip Code NJ 08054		Transaction ID :	SB21B.4182	
bank fee - merchant services fee Candidate Name		001	Amount of Each D	isbursement this Period	
COMMITTEE TO STRENGTHEN	AMERICA; THE ement For: 2016	Category/ Type		19.95	
Senate President State: District:	Primary General Other (specify) ▼				
Full Name (Last, First, Middle Initial) B. TD Bank			Date of Disbursem		
Mailing Address P.O.Box 5094			07 03	2015	
City Mount LAurel	State Zip Code NJ 08054		Transaction ID :	SB21B.4183	
Purpose of Disbursement bank fee Candidate Name		001	Amount of Each D	isbursement this Period	
COMMITTEE TO STRENGTHEN	AMERICA; THE	Category/ Type		25.00	
	Primary General Other (specify) ▼				
Full Name (Last, First, Middle Initial) C. TD Bank			Date of Disbursem		
Mailing Address P.O.Box 5094	Mailing Address P.O.Box 5094				
City Mount LAurel	State Zip Code NJ 08054		Transaction ID :	SB21B.4184	
bank fee - merchant services fee Candidate Name COMMITTEE TO STRENGTHEN	Candidate Name				
	ement For: 2016 Primary General Other (specify)	Туре		19.95	
SUBTOTAL of Disbursements This Page (optional) TOTAL This Period (last page this line number onl				64.90	

SCHEDULE B (FEC Form 3X)	Liea canarata cahadula	FOR LINE	
TEMIZED DISBURSEMENTS	Use separate schedule for each category of the Detailed Summary Page	ne Gricok om	y one) 22 23 24 25 26 28a 28b 28c 29 30b
Any information copied from such Reports and State or for commercial purposes, other than using the na			
NAME OF COMMITTEE (In Full) COMMITTEE TO STRENGTHEN	AMERICA; THE		
Full Name (Last, First, Middle Initial) TD Bank			Date of Disbursement
Mailing Address P.O.Box 5094			08 03 2015
City Mount LAurel Purpose of Disbursement	State Zip Code NJ 08054		Transaction ID : SB21B.4185
bank fee Candidate Name		001	Amount of Each Disbursement this Period
COMMITTEE TO STRENGTHEN Office Sought: House Senate President	AMERICA; THE ement For: 2016 Primary General Other (specify)	Category/ Type	25.00
State: District: Full Name (Last, First, Middle Initial) 3. TD Bank	-		Date of Disbursement
Mailing Address P.O.Box 5094			09 03 2015
City Mount LAurel Purpose of Disbursement	State Zip Code NJ 08054		Transaction ID : SB21B.4186
bank fee - merchant services fee Candidate Name		001 Category/	Amount of Each Disbursement this Period
	AMERICA; THE ment For: 2016 Primary General Other (specify)	Type	19.95
Full Name (Last, First, Middle Initial) TD Bank			Date of Disbursement
Mailing Address P.O.Box 5094	lailing Address P.O.Box 5094		
City Mount LAurel Purpose of Disbursement	State Zip Code NJ 08054		Transaction ID : SB21B.4187
bank fee Candidate Name COMMITTEE TO STRENGTHEN		001 Category/ Type	Amount of Each Disbursement this Period 25.00
Office Sought: House Disburse Senate President	ement For: 2016 Primary Genera Other (specify) ▼	al	

SCHEDULE B (FEC Form 3X)	Hee congrete acha	, , , , I TOTT EINE NOMBER.			PAGE	8 (OF 12	
ITEMIZED DISBURSEMENTS	Use separate sche for each category of Detailed Summary	of the	(check only 21b 27	one) 22 28a	23 28b	24 28c	25 29	26 30b
Any information copied from such Reports and Statem or for commercial purposes, other than using the nam								
NAME OF COMMITTEE (In Full) COMMITTEE TO STRENGTHEN A	MERICA; THE	E						
Full Name (Last, First, Middle Initial)				Date of	Disburse	ment		
A. TD Bank				M M	/ 0		Y	Υ
Mailing Address P.O.Box 5094				10	0;	3	2015	
Mount LAurel	tate Zip Cod NJ 08054	le		Trans	action ID	: SB21B.42	15	
Purpose of Disbursement bank fee - merchant services fee			001	Amount	of Each	Disburseme	nt this I	Period
Candidate Name COMMITTEE TO STRENGTHEN A	MERICA; THE	.	Category/ Type				19	0.95
Senate	ent For: 2016 Primary Ge Other (specify)	neral						
Full Name (Last, First, Middle Initial)								
B. TD Bank					Disburse			
Mailing Address P.O.Box 5094				10	0		2015	Y
Mount LAurel	tate Zip Cod NJ 08054	le		Trans	action ID	: SB21B.42	16	
Purpose of Disbursement bank fee			001	Amount	of Each	Disburseme	nt this I	Period
Candidate Name COMMITTEE TO STRENGTHEN A	MERICA: THI	E "	Category/ Type				25	5.00
Office Sought: House Disbursem	ent For: 2016	neral			,	,		
Full Name (Last, First, Middle Initial) C. TD Bank				Date of	Disburse	ment		
Mailing Address P.O.Box 5094	Mailing Address P.O.Box 5094						2015	Y
Mount LAurel	tate Zip Cod NJ 08054	le		Trans	action ID	: SB21B.42	:17	
Purpose of Disbursement bank fee - merchant services fee Candidate Name	Purpose of Disbursement bank fee - merchant services fee 001				of Each	Disburseme	nt this I	Period
COMMITTEE TO STRENGTHEN A		E	Category/ Type				19	0.95
Senate	ent For: 2016 Primary Ge Other (specify) ▼	neral						
SUBTOTAL of Disbursements This Page (optional) TOTAL This Period (last page this line number only).							64	.90

Use separate schedule(s) for each category of the Detailed Summary Page City State Zip Code Mount LAurel Purpose of Disbursement bank fee Candidate Name COMMITTEE TO STRENGTHEN AMERICA; THE Use separate schedule(s) for each category of the Detailed Summary Page Committee Candidate Name Committee Candidate Name Committee Committee Candidate Name Committee Candidate Name Committee Category/ Type Category/	
Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contribution or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committees. NAME OF COMMITTEE (In Full) COMMITTEE TO STRENGTHEN AMERICA; THE Full Name (Last, First, Middle Initial) A. TD Bank Mailing Address P.O.Box 5094 City State Zip Code Mount LAurel NJ 08054 Purpose of Disbursement bank fee Candidate Name Category/ Amount of Each Disbursement this Pe	30b
or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee NAME OF COMMITTEE (In Full) COMMITTEE TO STRENGTHEN AMERICA; THE Full Name (Last, First, Middle Initial) A. TD Bank Mailing Address P.O.Box 5094 City State Zip Code Mount LAurel Purpose of Disbursement NJ 08054 Purpose of Disbursement bank fee Candidate Name Category/ Category/ Category/ Category/ Category/ Category/	
NAME OF COMMITTEE (In Full) COMMITTEE TO STRENGTHEN AMERICA; THE Full Name (Last, First, Middle Initial) A. TD Bank Mailing Address P.O.Box 5094 City Mount LAurel Purpose of Disbursement NJ 08054 Purpose of Disbursement bank fee Candidate Name Category/ Category/ Category/ Category/ Category/	
COMMITTEE TO STRENGTHEN AMERICA; THE Full Name (Last, First, Middle Initial) A. TD Bank Mailing Address P.O.Box 5094 City State Zip Code Mount LAurel NJ 08054 Purpose of Disbursement bank fee 0001 Candidate Name Category/ Category/ Category/	
Full Name (Last, First, Middle Initial) A. TD Bank Mailing Address P.O.Box 5094 City State Zip Code Mount LAurel NJ 08054 Purpose of Disbursement bank fee O1 Candidate Name Category/ Full Name (Last, First, Middle Initial) Date of Disbursement Transaction ID: SB21B.4218 Amount of Each Disbursement this Pe	
A. TD Bank Mailing Address P.O.Box 5094 City State Zip Code Mount LAurel NJ 08054 Purpose of Disbursement bank fee 001 Candidate Name Date of Disbursement Transaction ID: SB21B.4218 Amount of Each Disbursement this Pe	
Mailing Address P.O.Box 5094 City State Zip Code Mount LAurel NJ 08054 Purpose of Disbursement bank fee 001 Candidate Name Category/	
Mailing Address P.O.Box 5094 City State Zip Code Mount LAurel NJ 08054 Purpose of Disbursement bank fee 001 Candidate Name Category/	_
Mount LAurel NJ 08054 Purpose of Disbursement bank fee 001 Candidate Name Category/ Transaction ID : SB21B.4218 Amount of Each Disbursement this Pe	
Mount LAurel NJ 08054 Purpose of Disbursement bank fee 0001 Candidate Name Category/ Transaction ID : SB21B.4218 Amount of Each Disbursement this Pe	
bank fee 001 Amount of Each Disbursement this Pe Candidate Name Category/	
Candidate Name Category/	
Category/	iod
Office Sought: House Disbursement For: 2016	
Senate General	
☐ President ☐ Other (specify) ▼ State: District:	
Full Name (Last, First, Middle Initial)	
B. TD Bank Date of Disbursement	
Mailing Address D.O.D., 5004	
Mailing Address P.O.Box 5094 12 03 2015	
City State Zip Code Transaction ID : SB21B.4226	
Mount LAurel NJ 08054 Purpose of Disbursement	
bank fee - merchant services fee 001 Amount of Each Disbursement this Pe	iod
Candidate Name COMMITTEE TO STRENGTHEN AMERICA: THE	5
COMMITTEE TO STRENGTHEN AMERICA; THE Type Office Sought: House Disbursement For: 2016	_
Senate Sought. Senate Senate General	
President Other (specify) ▼	
State: District:	
Full Name (Last, First, Middle Initial) C. TD Bank Date of Disbursement	
M M / D D / Y Y Y Y Y	1
Mailing Address P.O.Box 5094 12 03 2015	
City State Zip Code Transaction ID - Space 4997	
Mount LAurel NJ 08054	
Purpose of Disbursement bank fee 001 Amount of Each Disbursement this Pe	:ad
Candidate Name Category/	
COMMITTEE TO STRENGTHEN AMERICA; THE Type Type 23.0	
Office Sought: House Disbursement For: 2016 Senate Primary General	
Senate President President President President President President President President President	
State: District:	
	_
SUBTOTAL of Disbursements This Page (optional)	

S	CHEDULE B (FEC Form 3X)			EOD LIN				PAGE	10 (OF 12
	EMIZED DISBURSEMENTS	Use separate	` '	(check o	E NUMBEI	٦.	L	. , .GL	(-· ·-
11	LIVIIZED DISBURSEIVIEN IS	for each categ		21	,	X 23	2	4	25	<u> </u>
		Detailed Sumn	nary Page	27	28a		2	Вс	29	30b
Ar	y information copied from such Reports and Staten	nents may not be	e sold or used	by any ne	rson for th	e purpose	of solic	itina co	ontribu	tions
	for commercial purposes, other than using the nam									
abla	NAME OF COMMITTEE (In Full)									
$ \rangle$	COMMITTEE TO STRENGTHEN A	AMERICA:	ГНЕ							
\angle										
	Full Name (Last, First, Middle Initial)									
A.	Committee For Fiscal Responsibilit	У			Date	of Disburs	ement			
	Moiling Address DO Day 105						D /		045	Υ
	Mailing Address PO Box 135				08		28	2	015	
	City	State Zip	Code							
	Langhorne	PA 190			Trai	nsaction II) : SB2	3.4196		
	Purpose of Disbursement				\exists					
	Contribution			011	Amou	nt of Each	Disbur	semen	t this	Period
	Candidate Name			Category/				-	2000	0.00
	COMMITTEE TO STRENGTHEN A	•	THE	Type				7	2000	7.00
		nent For: 2016	1							
		Primary	General							
	State: District:	Other (specify)	▼							
_										
В.	Full Name (Last, First, Middle Initial) DONALD NORCROSS FOR CONG	CDECC			Date	of Disburs	ement			
υ.	DONALD NORCROSS FOR CONC	JKE33						V		V
	Mailing Address PO BOX 160				12		02		.015	Y
	The state of the s						-		.,.	_
	City	State Zip	Code		Trai	nsaction I	D · CB3	3 4206		
	COLLINGSWOOD	NJ 08	108			isacii0ii I	. JBZ.	J.72UU		
	Purpose of Disbursement campaign contribution			044			D:-!			David!
	Candidate Name			011	Amou	nt of Each	וטsbur	semen	this	reriod
	DONALD W NORCROSS			Category/			_		2000	0.00
		nent For: 2016		Туре		,		,		
		Primary	General							
		Other (specify)								
	State: NJ District: 01	(-	•							
	Full Name (Last, First, Middle Initial)									
C.	Dwight Evans for Congress				Date	of Disburs	ement			
					M	M / D	D /	Y	Υ	Υ
	Mailing Address PO Box 6578				12		31	2	015	
	01		0 - 1							
	•	State Zip PA 191	Code		Trai	nsaction I	D : SB2	3.4228		
	Purpose of Disbursement	19			\exists					
	campaign contribution			011	Δποι	nt of Each	n Diehur	semen	t thie	Period
	Candidate Name		L	Category/	Alliou	or Laci	. DIGDUI	50111611		. Criou
	Dwight Evans			Type					2500	0.00
	•	nent For: 2016	I		7 -	7		,		
	Senate	Primary	General							
	President	Other (specify)	▼							
_	State: PA District: 02									
								-		
s	UBTOTAL of Disbursements This Page (optional)							,	6500	.00
Γ										
ΙT	OTAL This Period (last page this line number only)				1.0	1 (0)		m	1 0	1

SCHEDULE B (FEC Form 3X)		FOR LINE	NUMBER: PAGE 11 OF 12
ITEMIZED DISBURSEMENTS	Use separate schedule(s)	FOR LINE (check only	IVOIVIBEIT:
I I LIVIIZED DISBURSEIVIEN IS	for each category of the	21b	22 💢 23 24 25 26
	Detailed Summary Page	27	28a 28b 28c 29 30b
Any information copied from such Reports and Statem	nents may not be sold or us	ed by any perso	on for the purpose of soliciting contributions
or for commercial purposes, other than using the name			
NAME OF COMMITTEE (In Full)			
angle COMMITTEE TO STRENGTHEN A	AMERICA: THE		
	- ,		
Full Name (Last, First, Middle Initial)			
A. Katie McGinty for Senate			Date of Disbursement
Mailing Address DO Day 20147			M M / D D / Y Y Y Y Y
Mailing Address PO Box 22447			11 29 2015
City	State Zip Code		
Philadelphia	PA 19110		Transaction ID: SB23.4205
Purpose of Disbursement			
campaign contribution		011	Amount of Each Disbursement this Period
Candidate Name		Category/	1500.00
KATHLEEN ALANA MCGINTY	ant For 0040	Туре	1000.00
	nent For: 2016 Primary General		
President	Other (specify)		
State: PA District: 00	- \-\ -J / ♥		
Full Name (Last, First, Middle Initial)			
В.			Date of Disbursement
			M M / D D / Y Y Y Y
Mailing Address			
City	7:- O-d-		
City	State Zip Code		
Purpose of Disbursement			
			Amount of Each Disbursement this Period
Candidate Name		Category/	
		Type	
Office Sought: House Disbursen			
	Primary General		
State: District:	Other (specify) ▼		
Full Name (Last, First, Middle Initial)			
C.			Date of Disbursement
			M M / D D / Y Y Y
Mailing Address			
Cit.	Note 75 Octo		
City	State Zip Code		
Purpose of Disbursement			
			Amount of Each Disbursement this Period
Candidate Name		Category/	
		Type	
Office Sought: House Disbursen			
	Primary General		
State: District:	Other (specify) ▼		
otate. District.			
SUBTOTAL of Disbursements This Page (optional)			1500.00
CODICIAL OF DISDUISCINGING THIS I age (Optional)			
TOTAL This Period (last page this line number only)			8000.00

SCHEDULE B (FEC Form 3X)	Use separate schedule(s)	FOR LINE	
ITEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	(check only 21b 27	one) 22 23 24 25 26 28a 28b 28c X 29 30b
Any information copied from such Reports and Stator for commercial purposes, other than using the n			
NAME OF COMMITTEE (In Full) COMMITTEE TO STRENGTHEN	I AMERICA; THE		
Full Name (Last, First, Middle Initial)	0 "		Data of Dishumanant
A. Community Planning and Advoca	cy Council		Date of Disbursement
Mailing Address 2500 McClellan Avenue			09 30 2015
City Pennsauken	State Zip Code NJ 08109		Transaction ID : SB29.4209
Purpose of Disbursement donation to 2015 Covenant Event		012	Amount of Each Disbursement this Period
Candidate Name		Category/ Type	1500.00
Senate President	sement For: 2016 ✓ Primary General Other (specify) ▼	.,,,,,	
State: District:			
Full Name (Last, First, Middle Initial) B. EFO Belgard and Schwartz for Fi	reeholder		Date of Disbursement
Mailing Address 313 Colonial Road			10 30 2015
City Edgewater Park	State Zip Code NJ 08010		Transaction ID : SB29.4222
Purpose of Disbursement non federal campaign contribution for county free	eholder election	011	Amount of Each Disbursement this Period
Candidate Name		Category/ Type	2500.00
	ement For: 2016 ✓ Primary General Other (specify) ▼		
Full Name (Last, First, Middle Initial) C. Greg Cirillo for Judge			Date of Disbursement
Mailing Address 1500 Market Street 3500E			10 16 2015
City Philadelphia	State Zip Code PA 19102		Transaction ID : SB29.4220
Purpose of Disbursement campaign contribution for non federal judicial can	npaign	011	
Candidate Name		Category/ Type	Amount of Each Disbursement this Period 5000.00
Office Sought: Senate President State: Disburs Senate	ement For: 2016 Primary General Other (specify) ▼	71	
	.		9000.00
SUBTOTAL of Disbursements This Page (optional			9000.00
TOTAL This Period (last page this line number on	ly)		9000.00